



Request for Quote

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STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
ONE CAPITOL HILL
PROVIDENCE RI 02908

CREATION DATE : 11-DEC-13
BID NUMBER: 7534364-2
TITLE: IV THERAPY SERVICES - RI VETERANS HOME

BUYER: Melillo, Charlotte A
PHONE #: 401-574-8110

BLANKET START : 01-FEB-14
BLANKET END : 31-JAN-17
BID CLOSING DATE AND TIME: 06-JAN-2014 10:15:00

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DOA CONTROLLER
ONE CAPITOL HILL, 4TH FLOOR
SMITH ST
PROVIDENCE, RI 02908
US

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DHS VETERANS HOME
480 METACOM AVE
BRISTOL, RI 02809
US

Requisition Number: 1343826

Line	Description	Quantity	Unit	Unit Price	Total
1	1/1/14 - 12/31/16 IV THERAPY SERVICES PER ATTACHED BID SPECIFICATIONS. QUESTIONS CONCERNING THIS BID SHOULD BE EMAILED TO: charlotte.melillo@purchasing.ri.gov before end of day on Dec. 23, 2013. BIDS SHOULD BE MAILED OR HAND DELIVERED TO: DEPARTMENT OF ADMINISTRATION, DIVISION OF PURCHASES, ONE CAPITOL HILL, 2ND FLOOR, PROVIDENCE, RI 02908 2/1/14 - 1/31/17 PRICE PER DAY-THERAPY TYPE: PAIN MANAGEMENT/PER DIEM (PUMP/SUPPLIES) PRICING TO INCLUDE PCA PUMP DRUG @ AWP (AVERAGE WHOLESALE PRICE)	1.00	Day		
2	2/1/14 - 1/31/17 PRICE PER DAY THERAPY TYPE: ANTIBIOTICS PER DIEM AND FLUSHES. DRUG @ AWP (AVERAGE WHOLESALE PRICE)	1.00	Day		
3	2/1/14 - 1/31/17 CATHETER SERVICES: MID-LINE INSERTION (SUPPLIES/CATHETER/NURSING) PRICE EACH MID-LINE INSERTION	1.00	Each		
4	2/1/14 - 1/31/17 ON CALL DELIVERY SERVICE 24/7	1.00	Each		
5	2/1/14 - 1/31/17 MONTHLY PORT FLUSH (SUPPLIES/NURSING) PRICE EACH FLUSH	1.00	Each		

Delivery: _____

Terms of Payment: _____

It is the Vendor's responsibility to check and download any and all addenda from the RIVIP. This offer may not be considered unless a signed RIVIP generated Bidder Certification Cover Form is attached and the Unit Price column is completed. The signed Certification Cover Form must be attached to the front of the offer

Blanket Requirements: 02/01/14 - 1/31/17

*****VENDOR MUST BE A LICENSED PHARMACY IN THE STATE OF RHODE ISLAND*****

IV THERAPY SERVICES FOR PALLIATIVE PROGRAM AND FACILITY WIDE IV ANTIBIOTIC THERAPY AT THE RI VETERANS HOME

THE FOLLOWING SERVICES ARE SOUGHT:
PREPARATION AND COMPOUNDING OF PHARMACEUTICALS
INCLUDING INTRAVENOUS MEDICATIONS; PROVIDING INFUSION
THERAPY AND/OR PLACEMENT OF MID-LINES

PROVIDE PHARMACY SERVICES ON A TWENTY-FOUR HOUR PER DAY
SEVEN-DAYS-A WEEK BASIS WITH A TWO-HOUR TURN-AROUND
TIME FOR ORDERS

PROVIDERS MUST HAVE A QUALITY ASSURANCE PROGRAM FOR
INTRAVENOUS MIXING. ALL PRODUCT AND PRESCRIPTION
LABELING PROCEDURES MUST FOLLOW APPROPRIATE STATE,
FEDERAL, AND LOCAL LAWS AND REGULATIONS

PROVIDER MUST ALSO COMPLY WITH THE REQUIREMENTS OF THE
JOINT COMMISSION ON ACCREDITATION OF HEALTHCARE
ORGANIZATION (JCAHO)

VENDOR WILL BILL RESIDENTS PRIVATE INSURANCE COMPANY.
FACILITY WILL BE BILLED FOR ANY DEDUCTIBLE OR CO-PAYS TO
APPROVED AMOUNT OF RESIDENTS INSURANCE

VENDORS INVOICE SUBMITTED TO THE AGENCY MUST BE ITEMIZED
SHOWING THE INSURANCE COMPANY HAS BEEN INVOICED, THE
INSURANCE PORTION OF PAYMENT, EACH SERVICE PERFORMED
(NUMBER AND UNITS) AND UNITS PRICING, AND THEN THE
EXTENDED AMOUNT AND TOTAL BALANCE DUE TO THE RI
VETERANS HOME

Contract Terms and Conditions

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Terms and Conditions

BID STANDARD TERMS AND CONDITIONS

TERMS AND CONDITIONS FOR THIS BID

DELIVERY PER AGENCY

DELIVERY OF GOODS OR SERVICES AS REQUESTED BY AGENCY.

MULTI YEAR AWARD

THIS IS A MULTI-YEAR BID/CONTRACT. PER RHODE ISLAND STATE LAW 37-2-33, CONTRACT OBLIGATIONS BEYOND THE CURRENT FISCAL YEAR ARE SUBJECT TO AVAILABILITY OF FUNDS. CONTINUATION OF THE CONTRACT BEYOND THE INITIAL FISCAL YEAR WILL BE AT THE DISCRETION OF THE STATE. TERMINATION MAY BE EFFECTED BY THE STATE BASED UPON DETERMINING FACTORS SUCH AS UNSATISFACTORY PERFORMANCE OR THE DETERMINATION BY THE STATE TO DISCONTINUE THE GOODS/SERVICES, OR TO REVISE THE SCOPE AND NEED FOR THE TYPE OF GOODS/SERVICES; ALSO MANAGEMENT OWNER DETERMINATIONS THAT MAY PRECLUDE THE NEED FOR GOODS/SERVICES.

PURCHASE AGREEMENT BID

BIDDING (a) A single price shall be quoted for each item against which a proposal is submitted. This price will be the maximum in effect during the agreement period. Any price decline at the manufacturer's level shall be reflected in a reduction of the agreement price to the State. (b) Quantities, if any, are estimated only. The agreement shall cover the actual quantities ordered during the period. Deliveries will be billed at the single, firm, awarded unit price quoted regardless of the quantities ordered. (c) Bid price is net F.O.B. destination and shall include inside delivery at no extra cost. (d) Bids for single items and/or a small percentage of total items listed, may, at the State's sole option, be rejected as being non-responsive to the intent of this request. **ORDERING** (a) The User Agency(s) will submit individual orders for the various items and various quantities as may be required during the agreement period. (b) Exception - Regardless of any agreement resulting from this bid, the State reserves the right to solicit prices separately for any extra large requirements for delivery to specific destinations.

RIVIP INFO - BID SUBMISSION REQUIREMENTS

It is the Vendor's responsibility to check and download any and all addenda from the RIVIP. This offer may not be considered unless a signed RIVIP generated Bidder Certification Cover Form is attached and the Unit Price column is completed. The signed Certification Cover Form must be attached to the front of the offer. When delivering offers in person to One Capitol Hill, vendors are advised to allow at least one hour additional time for clearance through security checkpoints.

MAILING ADDRESS FOR BID PROPOSALS ISSUED BY THE STATE OF RHODE ISLAND, DIVISION OF PURCHASES

All Bid Proposals must be submitted by mail or hand delivered to:

- State of Rhode Island
- Department of Administration
- Division of Purchases, Second floor
- One Capitol Hill
- Providence, RI 02908-5855

INSURANCE REQUIREMENTS

AN INSURANCE CERTIFICATE IN COMPLIANCE WITH PROVISIONS OF ITEM 31 (INSURANCE) OF THE GENERAL CONDITIONS OF PURCHASE IS REQUIRED FOR COMPREHENSIVE GENERAL LIABILITY, AUTOMOBILE LIABILITY, AND WORKERS' COMPENSATION AND MUST BE SUBMITTED BY THE SUCCESSFUL BIDDER(S) TO THE DIVISION OF PURCHASES PRIOR TO AWARD. THE INSURANCE CERTIFICATE MUST NAME THE STATE OF RHODE ISLAND AS CERTIFICATE HOLDER AND AS AN ADDITIONAL INSURED. FAILURE TO COMPLY WITH THESE PROVISIONS MAY RESULT IN REJECTION OF THE OFFEROR'S BID. ANNUAL RENEWAL CERTIFICATES MUST BE SUBMITTED TO THE AGENCY IDENTIFIED ON THE PURCHASE ORDER. FAILURE TO DO SO MAY BE GROUNDS FOR CANCELLATION OF CONTRACT.

NOTE: IF THIS BID COVERS CONSTRUCTION, SCHOOL BUSING, HAZARDOUS WASTE, OR VESSEL OPERATION, APPLICABLE COVERAGES FROM THE FOLLOWING LIST MUST ALSO BE SUBMITTED TO THE DIVISION OF PURCHASES PRIOR TO AWARD: * PROFESSIONAL LIABILITY INSURANCE (AKA ERRORS & OMISSIONS) - \$1 MILLION OR 5% OF ESTIMATED PROJECT COST, WHICHEVER IS GREATER. * BUILDER'S RISK INSURANCE - COVERAGE EQUAL TO FACE AMOUNT OF CONTRACT FOR CONSTRUCTION. * SCHOOL BUSING - AUTO LIABILITY COVERAGE IN THE AMOUNT OF \$5 MILLION. * ENVIRONMENTAL IMPAIRMENT (AKA POLLUTION CONTROL) - \$1 MILLION OR 5% OF FACE AMOUNT OF CONTRACT, WHICHEVER IS GREATER. * VESSEL OPERATION - (MARINE OR AIRCRAFT) - PROTECTION & INDEMNITY COVERAGE REQUIRED IN THE AMOUNT OF \$1 MILLION.

LICENSE REQUIREMENTS

VENDOR (OWNER OF COMPANY) IS RESPONSIBLE TO COMPLY WITH ALL LICENSING OR STATE PERMITS REQUIRED FOR THIS TYPE OF SERVICE. A COPY OF LICENSE/PERMIT SHOULD BE SUBMITTED WITH THIS BID. IN ADDITION TO THESE LICENSE REQUIREMENTS, BIDDER, BY SUBMISSION OF THIS BID, CERTIFIES THAT ANY/ALL WORK RELATED TO THIS BID, AND ANY SUBSEQUENT AWARD WHICH REQUIRES A RHODE ISLAND LICENSE(S), SHALL BE PERFORMED BY AN INDIVIDUAL(S) HOLDING A VALID RHODE ISLAND LICENSE.

CHARGES PERMITTED

NO CHARGES FOR TRAVEL, NO MILEAGE, NO MISCELLANEOUS CHARGES, NO PORTAL TO PORTAL.